Case 17-10274 Doc 15 Filed 05/02/17 Page 1 of 17

| Debtor 1 Debtor 2 (Spouse, if filing) | Barry ONeil First Name | Croves | | | | |
|--|-------------------------|------------------------|------------------------|--|--|--|
| | | Graves | | | | |
| | | | Name | Last Name | | |
| | First Name | Middle | e Name | Last Name | | |
| United States Bank | cruptcy Court for | · the· MIDDLE DI | ISTRICT OF NORTH | CAROLINA (NC EXEMPT | IONS) | |
| Omiou otatoo bam | araptoy Court for | | | | | |
| Case number 17 | 7-10274 | | | _ | | Check if this is an |
| | | | | | | amended filing |
| Official For | 40CA/F | , | | | | |
| Official For | | _ | | | | |
| Schedule | A/B: P | roperty | | | | 12/15 |
| | | | | an asset fits in more than on e are filing together, both are | | |
| | space is needed, | | | e top of any additional page | | |
| Allswer every question | JII. | | | | | |
| Part 1: Describe Ea | ach Residence, B | uilding, Land, or Ot | her Real Estate You Ov | wn or Have an Interest In | | |
| 1. Do you own or ha | ve any legal or ed | quitable interest in a | ny residence, building | , land, or similar property? | | |
| ☐ No. Go to Part 2 | 2. | | | | | |
| Yes. Where is t | he property? | | | | | |
| | proporty : | | | | | |
| | | | | | | |
| 1.1 | | | What is the property | y? Check all that apply | | |
| 2250 Willie | Pace Road | | Single-family | home | Do not deduct secured of | laims or exemptions. Put |
| Street address, if a | available, or other des | scription | Duplex or mul | lti-unit building | the amount of any secur | ed claims on Schedule D: ims Secured by Property. |
| | | | | or cooperative | Creditors who have old | iins decared by I Toperty. |
| | | | ☐ Manufactured | I or mobile home | | |
| Burlington | NC | 27217-0000 | ☐ Land | | Current value of the entire property? | Current value of the portion you own? |
| City | State | ZIP Code | ☐ Investment pr | roperty | \$78,775.00 | \$78,775.00 |
| | | | Timeshare | | Describe the nature of | your ownership interest |
| | | | Other | 41.41 | | nancy by the entireties, or |
| | | | Debtor 1 only | t in the property? Check one | Sole Interest | |
| Alamance | | | Debtor 2 only | | - | |
| County | | | Debtor 1 and | | | |
| | | | _ | of the debtors and another | Check if this is co (see instructions) | mmunity property |
| | | | Other information y | ou wish to add about this ite | em, such as local | |
| | | | property identificati | | | |
| | | | .IMPORTANT N | OTICES: | | |
| | | | (1) Valuation M | ethod (Sch. A & B): FN | /IV unless otherwise | noted. |
| | | | (2) Craditar alai | ima diaglaced on Cab | D | |
| | | | | ims disclosed on Sch. verified information p | | |
| | | | | an admission by the I | | |
| | | | | es, etc. Nor is this lis | | |
| | | | | y the Debtor(s) that su | uch parties are actua | I owners of such |
| | | | claims. | | | |
| | | | | | | |
| 2. Add the dollar | value of the po | ortion you own fo | r all of your entries | from Part 1, including an | y entries for | \$78,775.00 |

Part 2: Describe Your Vehicles

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| Debt | or 1 _ E | arry ONeil Graves | | Case number (if known) | 17-10274 |
|---------------|----------------------|--|---|--|---|
| | | | ole interest in any vehicles, whether they are regits or report it on Schedule G: Executory Contracts and | | any vehicles you own that |
| 3. C a | ırs, vans, | trucks, tractors, sport utility | vehicles, motorcycles | | |
| | No | | | | |
| | Yes | | | | |
| _ | res | | | | |
| 2.4 | Makai | Nissan | Who has an interest in the manager 2 Charles | Do not deduct seco | ured claims or exemptions. Put |
| 3.1 | Make: | Altima | Who has an interest in the property? Check one | | secured claims on Schedule D: ve Claims Secured by Property. |
| | Model: Year: | 2012 | Debtor 1 only□ Debtor 2 only | | |
| | | nate mileage: 86,188 | _ | Current value of t entire property? | he Current value of the portion you own? |
| | | formation: | ☐ At least one of the debtors and another | | |
| | VIN: 11 | NFAL2A95C1179518 | | * | |
| | Insura | nce Policy: | ☐ Check if this is community property | \$11,960 | .36 \$5,980.18 |
| | Dobto | shares interest | (see instructions) | | |
| | | anged spouse | | | |
| | 1170011 | | | | |
| | No Yes | | | | |
| | | | own for all of your entries from Part 2, including te that number here | | \$5,980.18 |
| | | | | l | |
| Part : | B: Descri | be Your Personal and Household | d Items | | |
| Do y | ou own o | or have any legal or equitable | interest in any of the following items? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| E | | goods and furnishings Major appliances, furniture, line | ens, china, kitchenware | | siame of oxemptione. |
| | Yes. De | scribe | | | |
| | | Household G | oods | | \$945.00 |
| E | No | | video, stereo, and digital equipment; computers, prin s, media players, games | nters, scanners; music co | ollections; electronic devices |
| | | Electronics | | | \$350.00 |
| E | xamples: No | s of value Antiques and figurines; painting other collections, memorabilia, scribe | gs, prints, or other artwork; books, pictures, or other collectibles | art objects; stamp, coin, | or baseball card collections; |
| 9. E c | luipment xamples: | for sports and hobbies Sports, photographic, exercise, musical instruments | and other hobby equipment; bicycles, pool tables, ç | golf clubs, skis; canoes a | and kayaks; carpentry tools; |
| | No | | | | |
| | | scribe | | | |
| Officia | al Form 1 | 06A/B | Schedule A/B: Property | | page |

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| De | ebtor 1 | Barry ONeil Graves | i | | Case number (if known) | 17-10274 | |
|-----|--------------------------|---|-------------------------|--|---------------------------------|---|-----|
| 10. | Firearn | | | | | | |
| | Examp ■ No | oles: Pistols, rifles, shotgu | ins, ammunition, and i | related equipment | | | |
| | | Describe | | | | | |
| 11. | Clothes Examp ☐ No | | rs, leather coats, desi | gner wear, shoes, accessories | | | |
| | Yes. | Describe | | | | | |
| | | Wear | ing Apparel | | | \$300. | 00 |
| | ■ No | | ostume jewelry, engag | ement rings, wedding rings, heirlod | om jewelry, watches, gems, g | old, silver | |
| 13. | _Examp | rm animals oles: Dogs, cats, birds, ho | orses | | | | |
| | ■ No □ Yes. | Describe | | | | | |
| | ■ No | - | | not already list, including any hea | alth aids you did not list | | |
| | ☐ Yes. | Give specific information | 1 | | | | |
| | for Pa | art 3. Write that number | here | art 3, including any entries for pa | ges you have attached | \$1,595.00 | |
| | | scribe Your Financial Asse /n or have any legal or e | | any of the following? | | Current value of the | _ |
| , | you on | m or have any logar or c | squitable interest in t | any or the following. | | portion you own? Do not deduct secure claims or exemptions. | |
| | □ No | oles: Money you have in y | | me, in a safe deposit box, and on h | and when you file your petition | on | |
| | | | | | Cash on Hand | \$270. | 00 |
| | Examp | | | unts; certificates of deposit; shares with the same institution, list each. Institution name: | in credit unions, brokerage h | nouses, and other similar | |
| | | | 01 11 | MataDaule | | ¢50 | 00 |
| | | 17.1. | Checking | MetaBank | | \$50. | 00 |
| 18. | | , mutual funds, or publionles: Bond funds, investm | | kerage firms, money market accoul | nts | | |
| | | | Institution or issuer n | name: | | | |
| 19. | | ublicly traded stock and enture | interests in incorpo | rated and unincorporated busine | esses, including an interes | t in an LLC, partnership, a | ınd |

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| D | ebtor 1 | Barry ONeil Graves | | Case number (if known) 17-1 | 0274 | |
|-----|--|---|--|--|--|--|
| | ☐ Yes. | Give specific information about the | | % of ownership: | | |
| 20. | Negoti | able instruments include personal | other negotiable and non-negotiable ins checks, cashiers' checks, promissory notes ou cannot transfer to someone by signing or | s, and money orders. | | |
| | ☐ Yes. | Give specific information about th Issuer nam | | | | |
| 21. | _Examp | nent or pension accounts bles: Interests in IRA, ERISA, Keo | gh, 401(k), 403(b), thrift savings accounts, o | or other pension or profit-sharing plans | | |
| | ■ No □ Yes. | List each account separately. Type of accou | int: Institution name: | | | |
| 22. | 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others | | | | | |
| | ■ No □ Yes. | | Institution name or indivi | dual: | | |
| 23. | Annuiti ■ No | ies (A contract for a periodic payn | nent of money to you, either for life or for a n | number of years) | | |
| | ☐ Yes | Issuer name and de | escription. | | | |
| 24. | 4. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). | | | | | |
| | ■ No □ Yes | Institution name an | d description. Separately file the records of | any interests.11 U.S.C. § 521(c): | | |
| 25. | Trusts, ■ No | equitable or future interests in | property (other than anything listed in lir | ne 1), and rights or powers exercisab | le for your benefit | |
| | ☐ Yes. | Give specific information about the | nem | | | |
| 26. | Examp ■ No | oles: Internet domain names, webs | e secrets, and other intellectual property sites, proceeds from royalties and licensing a | agreements | | |
| | | Give specific information about the | | | | |
| 27. | | es, franchises, and other generables: Building permits, exclusive lic | ar intangibles censes, cooperative association holdings, liq | uor licenses, professional licenses | | |
| | | Give specific information about the | nem | | | |
| M | oney or | property owed to you? | | p | urrent value of the ortion you own? o not deduct secured aims or exemptions. | |
| 28. | Tax ref | unds owed to you | | | | |
| | ■ Yes. | Give specific information about th | em, including whether you already filed the | returns and the tax years | | |
| | | | 2016 state and federal Tax refund: received \$4,235. | total | | |
| | | | Already received and included account balances. | in IRS and NC | \$0.00 | |
| | | | | | | |

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

■ No

| D | ebtor 1 | Barry ONeil Gra | ives | | Case number (if known) | 17-10274 |
|-------------|-----------------|--|--|---|-------------------------------|----------------------------|
| | ☐ Yes. | Give specific information | ation | | | |
| 30 | | | | , disability benefits, sick pay, vac else | cation pay, workers' compe | nsation, Social Security |
| | | Give specific informa | ation | | | |
| 31 | | ets in insurance policibles: Health, disability | | ings account (HSA); credit, home | eowner's, or renter's insura | nce |
| | ☐ Yes. | Name the insurance | company of each policy and Company name: | | eficiary: | Surrender or refund value: |
| 32 | If you a some o | are the beneficiary of one has died. | • , , | e who has died ls from a life insurance policy, or | are currently entitled to rec | eive property because |
| | ☐ Yes. | Give specific informa | ation | | | |
| 33 | Examp ■ No | oles: Accidents, emplo | oyment disputes, insurance o | filed a lawsuit or made a dema laims, or rights to sue | and for payment | |
| | | Describe each claim | | | | |
| 34 | Other o | contingent and unlic | quidated claims of every na | ture, including counterclaims | of the debtor and rights to | set off claims |
| | | Describe each claim | l | | | |
| 35 | ■ No | nancial assets you d | • | | | |
| | ☐ Yes. | Give specific informa | ation | | | |
| 36 | | | | 4, including any entries for pag | | \$320.00 |
| Pa | art 5: De | scribe Anv Business-R | Related Property You Own or H | ave an Interest In. List any real est | ate in Part 1. | |
| | | <u> </u> | or equitable interest in any bus | - | | |
| <i>31</i> . | _ ′ | to Part 6. | or equitable interest in any bus | illess-related property: | | |
| | ☐ Yes. G | So to line 38. | | | | |
| Pa | art 6: De | scribe Any Farm- and (ou own or have an intere | Commercial Fishing-Related P est in farmland, list it in Part 1. | operty You Own or Have an Intere | st In. | |
| 46 | _ ` | u own or have any le Go to Part 7. | egal or equitable interest in | any farm- or commercial fishii | ng-related property? | |
| | _ | Go to line 47. | | | | |
| Pa | art 7: | Describe All Property | y You Own or Have an Interes | in That You Did Not List Above | | |
| 53 | | | ry of any kind you did not a country club membership | ready list? | | |
| | Yes. | Give specific informa | ation | | | |
| | | | Possible Consumer Ri Subject to Approval of | ghts Claim(s) Settlement/Award by Bank | kruptcy Court | Unknown |

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| Debt | tor 1 Barry ONeil Graves | | Case number (if known) | 17-10274 |
|------|--|-----------------|---------------------------|------------------------|
| | Other Property of any kind not | already listed | | \$0.00 |
| 54. | Add the dollar value of all of your entries from Part 7. Write the | hat number here | | \$0.00 |
| Part | | | | |
| | Part 1: Total real estate, line 2 | | | \$78,775.00 |
| 56. | Part 2: Total vehicles, line 5 | \$5,980.18 | | |
| 57. | Part 3: Total personal and household items, line 15 | \$1,595.00 | | |
| 58. | Part 4: Total financial assets, line 36 | \$320.00 | | |
| 59. | Part 5: Total business-related property, line 45 | \$0.00 | | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. | Part 7: Total other property not listed, line 54 | \$0.00 | | |
| 62. | Total personal property. Add lines 56 through 61 | \$7,895.18 | Copy personal property to | otal \$7,895.18 |
| 63. | Total of all property on Schedule A/B. Add line 55 + line 62 | | | \$86.670.18 |

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| Fill in this information to identify y | your case: | | | |
|--|--|-------------------------------|--|-----------------------------------|
| Debtor 1 Barry ONeil G | Graves | | | |
| First Name | Middle Name Last Nam | е | | |
| Debtor 2 (Spouse if, filing) First Name | Middle Name Last Nam | e | | |
| United States Bankruptcy Court for t | he: MIDDLE DISTRICT OF NORTH CAROL | INA (NC EXEMPTIONS) | | |
| Case number 17-10274 | | | | if this is an led filing |
| Be as complete and accurate as possib | rs Who Have Claims Secu | re equally responsible for su | ipplying correct informa | |
| number (if known). 1. Do any creditors have claims secured | it this form to the court with your other schedule | , , | | me and case |
| Part 1: List All Secured Claims | | | | |
| for each claim. If more than one creditor | as more than one secured claim, list the creditor separ has a particular claim, list the other creditors in Part 2. petical order according to the creditor's name. | | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2.1 Alamance County Tax Collector | Describe the property that secures the claim: | \$0.00 | \$78,775.00 | \$0.00 |
| 124 West Elm Street Graham, NC 27253 Number, Street, City, State & Zip Code | 2250 Willie Pace Road Burlington, NC 27217 Alamance County .IMPORTANT NOTICES: (1) Valuation Method (Sch. A & B): FMV unless otherwise noted. (2) Creditor claims disclosed on Sch. D, E & F are estimates only, drawn largely from unve As of the date you file, the claim is: Check all the apply. Contingent Unliquidated | at | | |
| Who awas the daht? Chack and | Disputed | | | |
| Who owes the debt? Check one. Debtor 1 only | Nature of lien. Check all that apply. An agreement you made (such as mortgage of car loan) | or secured | | |
| ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lie | en) | | |
| At least one of the debtors and another | _ | , | | |
| ☐ Check if this claim relates to a community debt | ■ Other (including a right to offset) Notice | Purposes Only | | |
| Date debt was incurred Escrow | Last 4 digits of account number | | | |

2.2 City of Graham

Describe the property that secures the claim:

\$0.00

\$78,775.00

\$0.00

| Deb | tor 1 Barry ONeil Graves | | (| Case number (if know) | 17-10274 | |
|------|--|---|-----------|-----------------------|-------------|---|
| | First Name Middle N | lame Last Name | | | | |
| | Creditor's Name | 2250 Willie Pace Road Burlington NC 27217 Alamance County .IMPORTANT NOTICES: | | | | |
| | | (1) Valuation Method (Sch. A & B) FMV unless otherwise noted. | : | | | |
| | | (2) Creditor claims disclosed on Sch. D, E & F are estimates only, | | | | |
| | 201 South Main Street | drawn largely from unve | | | | |
| | P.O. Drawer 357 | As of the date you file, the claim is: Check al | that | | | |
| | Graham, NC 27253 | apply. | | | | |
| | | Contingent | | | | |
| | Number, Street, City, State & Zip Code | Unliquidated | | | | |
| | 4 1140 5 | Disputed | | | | |
| wnc | owes the debt? Check one. | Nature of lien. Check all that apply. | | | | |
| _ | Debtor 1 only Debtor 2 only | ☐ An agreement you made (such as mortgag car loan) | e or seci | ured | | |
| | Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's | lien) | | | |
| ПА | ☐ At least one of the debtors and another ☐ Judgment lien from a lawsuit | | | | | |
| | check if this claim relates to a | | Proper | rty Taxes - Included | In Escrow | |
| | community debt | - Other (including a right to onset) | | | | |
| Date | debt was incurred | Last 4 digits of account number | | | | |
| | Cradit Assentance | | | | | |
| 2.3 | Credit Acceptance Corporation | Describe the property that secures the clai | n· | \$11,960.36 | \$11,960.36 | \$0.00 |
| | Creditor's Name | 2012 Nissan Altima 86,188 miles | | | | • |
| | | VIN: 1NFAL2A95C1179518 | | | | |
| | | Insurance Policy: | | | | |
| | | modranico i onoy. | | | | |
| | | Debtor shares interest w/estrange | d | | | |
| | Attn. Managing Agent | spouse | _ | | | |
| | Attn: Managing Agent Post Office Box 513 | As of the date you file, the claim is: Check al | that | | | |
| | Southfield, MI 48037-0513 | apply. | | | | |
| | | Contingent | | | | |
| | Number, Street, City, State & Zip Code | Unliquidated | | | | |
| Who | owes the debt? Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | | |
| | Pebtor 1 only | ☐ An agreement you made (such as mortgage | | d | | |
| _ | | car loan) | a or seci | urea | | |
| _ | Debtor 2 only | <u> </u> | | | | |
| _ | Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's | lien) | | | |
| | t least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | | |
| | check if this claim relates to a community debt | Other (including a right to offset) | iase M | Money Security Inter | est | |
| Date | debt was incurred 2/2017 | Last 4 digits of account number | 9789 | | | |
| | Shellpoint Mortgage | | | | | |
| 2.4 | Servicing | Describe the property that secures the claim | n: | \$45,748.00 | \$78,775.00 | \$0.00 |

| Debtor 1 Barry ONeil Graves | | Case number (if know) | 17-10274 |
|--|---|------------------------------------|---------------------------------------|
| First Name Middle Na | ame Last Name | | |
| Creditor's Name | 2250 Willie Pace Road Burlington, NC 27217 Alamance County .IMPORTANT NOTICES: | | |
| | (1) Valuation Method (Sch. A & B): FMV unless otherwise noted. | | |
| Attn: Managing Agent Post Office Box 10826 Greenville, SC 29603-0826 | (2) Creditor claims disclosed on Sch. D, E & F are estimates only, drawn largely from unve As of the date you file, the claim is: Check all th apply. | at | |
| | Contingent | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated | | |
| Who owes the debt? Check one. | ☐ Disputed Nature of lien. Check all that apply. | | |
| ■ Debtor 1 only ■ Debtor 2 only | An agreement you made (such as mortgage of car loan) | or secured | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lie | en) | |
| ☐ At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) Deed o | f Trust | |
| 04/18/2007 to Date debt was incurred 01/31/2017 | Last 4 digits of account number 66 | 66 | |
| Add the dellar value of your entries in C | olumn A on this page. Write that number hare. | ¢57.700 | 26 |
| If this is the last page of your form, add | olumn A on this page. Write that number here: | \$57,708 | |
| Write that number here: | aciai valuo totalo iroin ali pagesi | \$57,708 | .36 |
| Part 2: List Others to Be Notified fo | r a Debt That You Already Listed | | |
| trying to collect from you for a debt you o | e notified about your bankruptcy for a debt that we to someone else, list the creditor in Part 1, a you listed in Part 1, list the additional creditors is page. | and then list the collection age | ncy here. Similarly, if you have more |
| Name, Number, Street, City, State & 2 | | n which line in Part 1 did you ent | er the creditor? 2.3 |
| Credit Acceptance Corpora Silver Triangle Building 25505 W. Twelve Mile Rd, S Southfield, MI 48034-8339 | La | ast 4 digits of account number | - |
| Name, Number, Street, City, State & 2 Stern & Eisenberg PC | Zip Code Oı | n which line in Part 1 did you ent | er the creditor? 2.4 |
| 1709 Devonshire Drive Columbia, SC 29204 | Læ | st 4 digits of account number | - |

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| Fill in th | is information to identify you | r case: | | |
|--------------------------|---|--|---|---|
| Debtor 1 | Barry ONeil Grav | ves | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse if, | | Middle Name | Last Name | |
| United S | states Bankruptcy Court for the: | MIDDLE DISTRICT OF | NORTH CAROLINA (NC EXEMPTION | S) |
| Case nu (if known) | mber <u>17-10274</u> | | | ■ Check if this is an amended filing |
| | al Form 106H dule H: Your Cod | lebtors | | 12/15 |
| people a fill it out, | re filing together, both are eq | ually responsible for suppe boxes on the left. Attach | olying correct information. If more sp n the Additional Page to this page. O | d accurate as possible. If two married ace is needed, copy the Additional Page, n the top of any Additional Pages, write |
| 1. D | o you have any codebtors? (If | you are filing a joint case, | do not list either spouse as a codebtor. | |
| □N | 0 | | | |
| ■ Y | es | | | |
| | | | operty state or territory? (Community erto Rico, Texas, Washington, and Wis | |
| | o. Go to line 3. es. Did your spouse, former spo | ouse, or legal equivalent live | e with you at the time? | |
| in liı Forr | ne 2 again as a codebtor only | if that person is a guaran | tor or cosigner. Make sure you have | e is filing with you. List the person shown listed the creditor on Schedule D (Official dule D, Schedule E/F, or Schedule G to fill |
| | Column 1: Your codebtor Name, Number, Street, City, State and 2 | ZIP Code | | The creditor to whom you owe the debt schedules that apply: |
| 3.1 | Melissa Nicole Graves 1331 Parker Street Burlington, NC 27217 | | ☐ Sched | ule D, line2.3 ule E/F, line ule G cceptance Corporation |
| 3.2 | Nia Woods 1017 Frazier Road Mebane, NC 27302 | | ■ Sched | ule D, line ule E/F, line 4.16 ule G Mortgage Company ***** |

North Carolina Employment Security Commission Post Office Box 26504 Raleigh, NC 27611

NC Child Support Centralized Collections Post Office Box 900006 Raleigh, NC 27675-9006

Equifax Information Systems LLC P.O. Box 740241 Atlanta, GA 30374-0241

Experian P.O. Box 2002 Allen, TX 75013-2002

Trans Union Corporation P.O. Box 2000 Crum Lynne, PA 19022-2000

Internal Revenue Service (MD)**
Post Office Box 7346
Philadelphia, PA 19101-7346

US Attorney's Office (MD)**
101 S. Edgeworth Street, 4th floor
Greensboro, NC 27401

Absolute Collection Service ** 421 Fayetteville Street Mall Suite 600 Raleigh, NC 27601

Alamance County EMS Post Office Box 29526 Greensboro, NC 27429-5285

Alamance County Tax Collector 124 West Elm Street Graham, NC 27253 Alamance County Tax Collector 124 West Elm Street Graham, NC 27253

Alamance Ear Nose & Throat LLP Post Office Box 2 Burlington, NC 27216-0002

Alamance Regional Medical Center 1240 Huffman Mill Road Burlington, NC 27215

Applied Bank c/o Capital Management Services, LP 726 Exchange Street, Suite 700 Buffalo, NY 14210

AT&T **
Post Office Box 105503
Atlanta, GA 30348

AT&T **
Post Office Box 105503
Atlanta, GA 30348

Bank of America Post Office Box 25118 Tampa, FL 33622-5118

Bell South Post Office Box 1262 Charlotte, NC 28201-1262

Benjamin Gilbert, Director Attn: Legal Dept. of UNC Hospitals 101 Manning Drive Chapel Hill, NC 27514

Bull City Financial Solutions, Inc. 1107 W Main St Suite 201 Durham, NC 27701 Bull City Financial Solutions, Inc. 1107 W Main St Suite 201 Durham, NC 27701

City of Graham 201 South Main Street P.O. Drawer 357 Graham, NC 27253

City of Graham 201 South Main Street P.O. Drawer 357 Graham, NC 27253

CRA Collections PO Box 2103 Mechanicsburg, PA 17055

Credit Acceptance Corporation Attn: Managing Agent Post Office Box 513 Southfield, MI 48037-0513

Credit Acceptance Corporation Silver Triangle Building 25505 W. Twelve Mile Rd, Ste 3000 Southfield, MI 48034-8339

CSDDUR
Post Office Box 530
Durham, NC 27702-0530

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Post Office Box 530
Durham, NC 27702-0530

Department of Education/Nelnet 121 South 13 Street Lincoln, NE 68508

DIRECTV 2230 East Imperial Highway Mail Station LA1/N367 El Segundo, CA 90245 Diversified Consultants, Inc. 10550 Deerwood Park Blvd Suite 708 Jacksonville, FL 32256

Inter Collec Post Office Box 3136 Winston Salem, NC 27102

Internal Revenue Service (ED)**
Post Office Box 21126
Philadelphia, PA 19114-0326

Kernodle Clinic Post Office Box 1717 Burlington, NC 27216

Law Offices of John T. Orcutt 6616-203 Six Forks Road Raleigh, NC 27615

Melissa Nicole Graves 1331 Parker Street Burlington, NC 27217

Midland Mortgage Company ******
Attn: Managing Agent
Post Office Box 26648
Oklahoma City, OK 73126-6648

NC Child Support Centralized Collections Post Office Box 900006 Raleigh, NC 27675-9006

NCO Financial Services **
PO Box 15630
Dept 99
Wilmington, DE 19850

Nia Woods 1017 Frazier Road Mebane, NC 27302 North Carolina Department of Revenu c/o NC Department of Justice Post Office Box 629 Raleigh, NC 27602-0629

North Carolina Department of Revenu c/o Reginald S. Hinton Post Office Box 25000 Raleigh, NC 27640-5000

North Carolina Dept of Revenue** Post Office Box 1168 Raleigh, NC 27602-1168

Optima Recovery Services Post Office Box 52968 Knoxville, TN 37950-2968

Shellpoint Mortgage Servicing Attn: Managing Agent Post Office Box 10826 Greenville, SC 29603-0826

Sprint c/o RPM Post Office Box 768 Bothell, WA 98041

Stern & Eisenberg PC 1709 Devonshire Drive Columbia, SC 29204

Time Warner Cable Post Office Drawer 40508 Fayetteville, NC 28309-0508

UNC Hospitals**
211 Friday Center Drive
Suite G21
Chapel Hill, NC 27517

UNC Physicians & Associates**
Post Office Box 168
Chapel Hill, NC 27514

US Attorney's Office (MD)**
101 S. Edgeworth Street, 4th floor
Greensboro, NC 27401

US Attorney's Office (ED) ** 310 New Bern Avenue Suite 800, Federal Building Raleigh, NC 27601-1461

CERTIFICATE OF SERVICE

I, Patty Cherigo, of Law Offices of John T. Orcutt, P.C., certify under penalty of perjury that I am, and at all times hereinafter mentioned was, more than eighteen (18) years of age and that on May 2, 2017, I served a copy of the **Amended Schedule A/B**, **Amended Schedule D**, **Amended Schedule H**, and **Amended Creditors Mailing Matrix**, by automatic electronic noticing, upon the following parties:

Anita Jo Kinlaw Troxler Chapter 13 Trustee

by regular U.S. mail, upon the following parties (names and addresses):

Credit Acceptance Corporation Attn: Managing Agent Post Office Box 513 Southfield, MI 48037-0513

Melissa Nicole Graves 1331 Parker Street Burlington, NC 27217

s/ Patty Cherigo

Patty Cherigo

amend2.wpt (rev. 3/26/07)